

Premise Information

TO ACCOMPANY STATE FORM 52009

State Form 52010 (R/5-05)

Page _____ of _____
Business Farm Name _____

Part 2:

Complete a premise form for each separate location where animals are housed. Sites under the same management but separated by no more than a county road may be considered contiguous.

Primary Premise Information

Premise Name/Description: _____

example "home place", "heifer place"

Premise Address (*physical location, no P.O. Boxes*). Check as appropriate:

- ☐ Premise address is the same as Business/Farm account address on page one.
☐ Premise address is unknown. Provide legal land description.

Township

Range

Section

☐ Premise address is: _____

City _____ State _____ ZIP _____ County _____

Premise Type (*check all that apply*):

- ☐ Farm/Producer Unit/Stable ☐ Clinic ☐ Exhibition site (*show site*) ☐ Market/collection point ☐ Research Facility
☐ Non-producer Participant ☐ Quarantine Facility ☐ Rendering ☐ Slaughter plant ☐ Tagging site ☐ Zoo

Species at Premise (*check all that apply*):

- ☐ Cattle/Bison ☐ Swine ☐ Sheep ☐ Goats ☐ Horse ☐ Poultry ☐ Deer/Elk ☐ Camelid ☐ Emu/Ostrich

Is the contact for this location the same as the primary contact listed on part 1?

☐ YES ☐ NO If no, complete the following:

Contact _____ Phone Number _____

Contact _____ Phone Number _____

Additional Premise Information

Premise Name/Description: _____

example "home place", "heifer place"

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☐ YES ☐ NO If no, complete the following:

Contact _____ Phone Number _____

Contact _____ Phone Number _____



If you have more premises (*animal locations*) please complete additional sheets.

Return forms to: Indiana State Board of Animal Health, 805 Beachway Dr. Ste. 50,
Indianapolis, IN 46224

For questions, contact BOAH: 317-227-0328 or email: animalID@boah.in.gov

Additional Premise Information

Premise Name/Description: _____
example "home place", "heifer place"

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City _____ State _____ ZIP _____ County _____

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